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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *Nael JL*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

03/19/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 12	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Signature _____ Initials _____					

## ADDRESS

32692

## TITLE

Method of orienting an orthodontic appliance to a tooth

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